5

6

7

8

9

12

13

14

15

16

17

18

19

20

21

22

23

24



LRBb2134/P1 ALL:ALL:ALL

PJK, ed

- *b0779/1.3* **864.** Page 523, line 10: delete lines 10 and 11.
- 2 *b2193/1.15* 865. Page 523, line 11: after that line insert:
- 3 *b2193/1.15* "Section 1381g. 39.41 (1) (bm) of the statutes is amended to read:
 - 39.41 (1) (bm) "Senior" means a pupil enrolled in the 12th grade in a public or private high school, the school operated by the Wisconsin School Educational Services Program for the Deaf and Hard of Hearing or the school operated by the Wisconsin Center for the Blind and Visually Impaired.".
 - *b2193/1.16* 866. Page 523, line 17: after that line insert:
- *b2193/1.16* "SECTION 1381p. 39.41 (1m) (c) 2. of the statutes is amended to read:
 - 39.41 (1m) (c) 2. For the <u>school operated by the Wisconsin School Educational</u>

 <u>Services Program</u> for the Deaf <u>and Hard of Hearing</u>, designate the senior with the highest grade point average in all subjects as a scholar.
 - ***b2193/1.16*** **SECTION 1381r.** 39.41 (1m) (fm) of the statutes is amended to read:
 - School Educational Services Program for the Deaf and Hard of Hearing have the same grade point average and, except for the limitation of one designated senior, are otherwise eligible for designation under par. (c) 2., the executive secretary shall make the designation under par. (c) 2. of the senior who may be eligible for a higher education scholarship as a scholar and, if that senior does not qualify for a higher education scholarship under sub. (2) (a) or (3) (a), shall designate one or more of the remaining seniors with the same grade point average as eligible for a higher

education scholarship as a scholar under sub. (2) (a) or (3) (a) until the scholarship
may be awarded by the board.".

b0779/1.4 **867.** Page 523, line 18: delete lines 18 to 22.

b0774/1.1 868. Page 523, line 22: after that line insert:

b0774/1.1 "Section 1382r. 39.44 (1) (b) of the statutes is amended to read: 39.44 (1) (b) There is established, to be administered by the board, the minority undergraduate retention grant program for minority undergraduates students enrolled as freshmen, sophomores, juniors, or seniors in private, nonprofit higher educational institutions in this state or in technical colleges in this state.".

b1524/1.1 869. Page 524, line 3: after that line insert:

b1524/1.1 "SECTION 1384m. 39.75 (7) (d) of the statutes is amended to read: 39.75 (7) (d) The commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the commission shall be subject to the audit and accounting procedures established by its bylaws. However, all receipts and disbursements of funds handled by the commission shall be audited yearly by a qualified certified public accountant licensed or certified under ch. 442, and the report of the audit shall be included in and become part of the annual reports of the commission."

b1524/1.2 870. Page 524, line 16: after that line insert:

b1524/1.2 "Section 1385m. 39.80 (5) (c) of the statutes is amended to read: 39.80 (5) (c) The commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the commission shall be subject to the audit and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the commission shall be audited

1	yearly by a certified or licensed public accountant licensed or certified under ch. 442
2	and the report of the audit shall be included in and become part of the annual report
3	of the commission.".
4	*b0757/2.45*871. Page 524, line 17: delete the material beginning with that
5	line and ending with page 532, line 13.
6	*b2221/3.103* 872. Page 532, line 13: after that line insert:
7	*b2221/3.103* "Section 1387e. 40.02 (17) (n) of the statutes is created to read:
8	40.02 (17) (n) Notwithstanding par. (d), each participant who is a state forest
9	ranger on or after the effective date of this paragraph [revisor inserts date], shall
10	be granted creditable service as a protective occupation participant for all covered
11	service as a state forest ranger that was earned on or after the effective date of this
12	paragraph [revisor inserts date], but may not be granted creditable service as a
13	protective occupation participant for any covered service as a state forest ranger that
14	was earned before the effective date of this paragraph [revisor inserts date],
15	unless that service was earned while the participant was classified under sub. (48)
16	(a) and s. 40.06 (1) (d) as a protective occupation participant.".
17	*b1684/1.6* 873. Page 533, line 2: after that line insert:
18	*b1684/1.6* "Section 1389t. 40.02 (54) (a) of the statutes is repealed.".
19	*b2221/3.104* 874. Page 533, line 2: after that line insert:
20	*b2221/3.104* "Section 1389r. 40.02 (48) (c) of the statutes is amended to
21	read:
22	40.02 (48) (c) In s. 40.65, "protective occupation participant" means a
23	participating employee who is a police officer, fire fighter, an individual determined
24	by a participating employer under par. (a) or (bm) to be a protective occupation

participant, county undersheriff, deputy sheriff, state probation and parole officer, county traffic police officer, conservation warden, state forest ranger, field conservation employee of the department of natural resources or the department of forestry who is subject to call for forest fire control or warden duty, member of the state traffic patrol, state motor vehicle inspector, University of Wisconsin System full—time police officer, guard or any other employee whose principal duties are supervision and discipline of inmates at a state penal institution, excise tax investigator employed by the department of revenue, person employed under s. 61.66 (1), or special criminal investigation agent employed by the department of justice.".

b2032/2.3 875. Page 533, line 4: after that line insert:

b2032/2.3 "Section 1391h. 40.03 (2) (it) of the statutes is created to read:

40.03 (2) (it) Shall promulgate, with the approval of the private employer health care coverage board, all rules required for the administration of the private employer health care coverage program established under subch. X.".

b1043/1.1 876. Page 534, line 23: after that line insert:

b1043/1.1 "Section 1398mn. 40.21 (3m) of the statutes is created to read:

40.21 (3m) A city-county health department that is established under s. 251.02 (1m), that is subject to s. 251.02 (1r), and that is not otherwise a participating employer, is a participating employer with respect to its employees who are included in a collective bargaining unit for which a representative is recognized or certified under subch. IV of ch. 111 and is not required to adopt a resolution electing to participate in the Wisconsin retirement system or provide notice of such election to the department under sub. (1).".

b1515/4.1 877. Page 534, line 23: after that line insert:

b1515/4.1 "Section 1398r. 40.51 (12) of the statutes is amended to read:

40.51 (12) Every managed care defined network plan, as defined in s. 609.01 (3e) (1b), and every limited service health organization, as defined in s. 609.01 (3), that is offered by the state under sub. (6) shall comply with ch. 609.

b1515/4.1 Section 1398s. 40.51 (13) of the statutes is amended to read:

40.51 (13) Every managed care defined network plan, as defined in s. 609.01 (3e) (1b), and every limited service health organization, as defined in s. 609.01 (3), that is offered by the group insurance board under sub. (7) shall comply with ch. 609.".

b1589/1.1 878. Page 534, line 23: after that line insert:

b1589/1.1 "Section 1398s. 40.05 (4) (b) of the statutes is amended to read.

40.05 (4) (b) Except as provided under pars. (bc) and (bp), accumulated unused sick leave under ss. 13.121 (4), 36.30, 230.35 (2), 233.10, and 757.02 (5) and subch. I or V of ch. 111 of any eligible employee shall, at the time of death, upon qualifying for an immediate annuity or for a lump sum payment under s. 40.25 (1) or upon termination of creditable service and qualifying as an eligible employee under s. 40.02 (25) (b) 6. or 10., be converted, at the employee's current basic pay rate, to credits for payment of health insurance premiums on behalf of the employee or the employee's surviving insured dependents. Any supplemental compensation that is paid to a state employee who is classified under the state classified civil service as a teacher, teacher supervisor, or education director for the employee's completion of educational courses that have been approved by the employee's employer is considered as part of the employee's basic pay for purposes of this paragraph. The full premium for any eligible employee who is insured at the time of retirement, or

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

for the surviving insured dependents of an eligible employee who is deceased, shall be deducted from the credits until the credits are exhausted and paid from the account under s. 40.04 (10), and then deducted from annuity payments, if the annuity is sufficient. The department shall provide for the direct payment of premiums by the insured to the insurer if the premium to be withheld exceeds the annuity payment. Except as provided in par. (bd), upon Upon conversion of an employee's unused sick leave to credits under this paragraph or par. (bf), the employee or, if the employee is deceased, the employee's surviving insured dependents may initiate deductions from those credits or may elect to delay initiation of deductions from those credits for any period of time, but only if the employee or surviving insured dependents are covered by a comparable health insurance plan or policy during the period beginning on the date of the conversion and ending on the last day of the 2nd month after the date on which the employee or surviving insured dependents later elect to initiate deductions from those credits. If an employee or an employee's surviving insured dependents elect to delay initiation of deductions from those credits, an employee or the employee's surviving insured dependents may only later elect to initiate deductions from those credits during the annual enrollment period under par. (be). A health insurance plan or policy is considered comparable if it provides hospital and medical benefits that are substantially equivalent to the standard health insurance plan established under s. 40.52 (1).

b1589/1.1 Section 1398t. 40.05 (4) (bd) of the statutes is repealed.

b1589/1.1 SECTION 1398u. 40.05 (4) (be) of the statutes is repealed and recreated to read:

40.05 (4) (be) The department shall establish an annual enrollment period during which an employee or, if the employee is deceased, an employee's surviving insured dependents may elect to initiate or delay continuation of deductions from the employee's sick leave credits under par. (b). An employee or surviving insured dependent may elect to continue or delay continuation of such deductions any number of times. If an employee or surviving insured dependent has initiated the deductions but later elects to delay continuation of the deductions, the employee or surviving insured dependent must be covered by a comparable health insurance plan or policy during the period beginning on the date on which the employee or surviving insured dependent delays continuation of the deductions and ending on the date on which the employee or surviving insured dependent later elects to continue the deductions. A health insurance plan or policy is considered comparable if it provides hospital and medical benefits that are substantially equivalent to the standard health insurance plan established under s. 40.52 (1)."

b2221/3.105 879. Page 534, line 23: after that line insert:

b2221/3.105 "Section 1398r. 40.65 (4w) of the statutes is created to read:

40.65 (4w) Λ state forest ranger who becomes a protective occupation participant on or after the effective date of this subsection [revisor inserts date], is not entitled to a duty disability benefit under this section for an injury or disease occurring before the effective date of this subsection [revisor inserts date].".

b0891/1.2 880. Page 535, line 6: after that line insert:

b0891/1.2 "Section 1400m. 41.11 (7) of the statutes is created to read:

41.11 (7) WILD RIVERS INTERPRETIVE CENTER GRANTS. From the appropriation under s. 20.380 (1) (kg), the department shall make a grant of \$20,000 in each fiscal

 $\dot{\mathbf{2}}$

year to the Florence County forestry and park department for distribution of state tourism materials at the Wild Rivers Interpretive Center.".

b1836/1.1 881. Page 535, line 6: after that line insert:

b1836/1.1 "Section 1400m. 41.11 (4) of the statutes is amended to read:

41.11 (4) Advertising. The department shall plan and conduct a program of advertising and promotion designed to attract interested persons to this state and to stimulate the enjoyment of its recreational opportunities by residents and nonresidents alike. Any contracts engaging a private agency to conduct an advertising or promotion program under this subsection shall reserve to the department the right to terminate the contract if the service is unsatisfactory to the department. The department shall encourage and coordinate the efforts of public and private organizations to publicize the facilities and attractions of the state for the purpose of stimulating their enjoyment by residents and tourists. The department shall advertise historic sites and state parks with funding from the same appropriation account or accounts.".

b2032/2.4 882. Page 535, line 6: after that line insert:

b2032/2.4 "Section 1400b. 40.98 (1) (bm) of the statutes is created to read:

40.98 (1) (bm) "Eligible employee" has the meaning given in s. 632.745 (5) (a).

b2032/2.4 Section 1400c. 40.98 (1) (d) of the statutes is amended to read:

40.98 (1) (d) "Employer" means any person doing business or operating an organization in this state and employing at least 2 <u>eligible</u> employees, except that for a person operating a farm business the person must employ at least one <u>eligible</u> employee. "Employer" does not include an employer as defined in s. 40.02 (28).

b2032/2.4 Section 1400d. 40.98 (2) (a) 3. of the statutes is amended to read:

	40.98 (2) (a) 3. The administrator selected under subd. 2., or the department
	if no administrator has been selected under subd. 2., shall enter into contracts with
	insurers who are to provide health care coverage under the health care coverage
	program.
	b2032/2.4 Section 1400e. 40.98 (2) (a) 4. of the statutes is amended to read:
	40.98 (2) (a) 4. The department or the administrator selected under subd. 2.
٠.	shall solicit and accept bids and shall enter into a contract for marketing the health
	care coverage program.
	b2032/2.4 Section 1400em. 40.98 (2) (a) 5. of the statutes is amended to
	read:
	40.98 (2) (a) 5. The department or the administrator selected under subd. 2.
	shall maintain a toll-free telephone number to provide information on the health
	care coverage program.
	b2032/2.4 Section 1400f. 40.98 (2) (d) of the statutes is amended to read:
	40.98 (2) (d) All insurance rates for health care coverage under the program
	shall be published annually in a single publication that is made available to
	employers and employees in a manner determined by the board. Rates that apply
	to coverage for small employers, as defined in s. 635.02 (7), shall be published at least
	annually, as required in s. 635.12. The rates may be listed by county or by any other
	regional factor that the board considers appropriate. Annually, the board shall
	submit a report to the appropriate standing committees under s. 13.172 (3)
	specifying the average insurance rate for health care coverage under the program by
	county or by any other regional factor the board considers appropriate.
	b2032/2.4 Section 1400g. 40.98 (3) (a) of the statutes is amended to read:

1	40.98 (3) (a) Offer health care coverage under one or more plans to all of its
2	permanent eligible employees who have a normal work week of 30 or more hours and,
3	if permitted by any plan offered by an insurer under the health care coverage
4	program, may offer health care coverage under one or more plans such a plan to any
5	of its other employees.
6	* b2032/2.4 * Section 1400h. 40.98 (3) (b) of the statutes is amended to read:
7	40.98 (3) (b) Provide health care coverage under one or more plans to at least
8	50% of its permanent eligible employees who have a normal work week of 30 or more
9	hours and who do not otherwise receive health care coverage as a dependent under
10	any other plan that is not offered by the employer or a percentage of such employees
11	specified by the board, whichever percentage is greater.
12	*b2032/2.4* Section 1400i. 40.98 (3) (c) of the statutes is amended to read:
13	40.98 (3) (c) Pay for each eligible employee at least 50% but not more than 100%
14	of the lowest premium rate that would be of the lowest premium rate for single
15	coverage that is available to the employer for that employee's coverage under the
16	health care coverage program.
17	* b2032/2.4 * Section 1400j. 40.98 (5) of the statutes is renumbered 40.98 (5)
18	(am).
19	*b2032/2.4* Section 1400k. 40.98 (5) (bm) of the statutes is created to read:
20	40.98 (5) (bm) Notwithstanding par. (am), the department, in consultation
21	with the board, may limit the requirement under par. (am) to compliance with s.
22	635.19.
23	*b2032/2.4* Section 1400L. 40.98 (6) (b) of the statutes is amended to read:
24	40.98 (6) (b) An insurance agent may not sell any health care coverage under
25	the health care coverage program on behalf of an insurer unless he or she is employed

1	by the insurer or has a contract with the insurer to sell the health care coverage on
2	behalf of listed by the insurer under s. 628.11.
3	*b2032/2.4* Section 1400m. 40.98 (6) (d) of the statutes is repealed and
4	recreated to read:
5	40.98 (6) (d) The board may establish training requirements that an insurance
6	agent must satisfy, in addition to any requirements under s. 628.04 (3), to sell health
7	care coverage under the health care coverage program.
8	*b2032/2.4* Section 1400n. 40.98 (6m) of the statutes is created to read:
9	40.98 (6m) The secretary of administration shall lapse from the appropriation
10	under s. $20.515(2)(g)$ to the general fund the amounts necessary to repay the loan
11	from the state life insurance fund under s. 607.25 when the secretary of
12	administration, after consulting with the board, determines that funds in the
13	appropriation under s. $20.515(2)(g)$ are sufficient to make the lapse. The amounts
14	that are required to be lapsed under s. 20.515 (2) (g) shall equal the amount necessary
15	to repay the loan, less any amount that is lapsed to the general fund under s. 20.515
16	(2) (a) at the end of the 2001–03 fiscal biennium. The secretary of administration
17	may lapse the amounts under s. 20.515 (2) (g) in installments.".
18	* b2033/1.7 * 883. Page 535, line 12: delete that line and substitute:
19	* b2033/1.7 * "Section 1401. 41.19 (1) (b) of the statutes is created to read:
20	41.19 (1) (b) "Nonprofit organization" has the meaning given in s. 108.02 (19).
21	*b2033/1.7* Section 1402. 41.19 (2m) (c) (intro.) of the statutes is amended
22	to read:
23	41.19 (2m) (c) (intro.) Subject to par. (d), from the appropriation appropriations
24	under s. 20.380 (1) (bm) and (kg), the department shall, in the fiscal biennium in

which an area is selected under par. (a), award a grant to the applicant on behalf of an the area of the state selected under par. (a) if all of the following apply:

b2033/1.7 SECTION 1403. 41.19 (2m) (d) of the statutes is amended to read: 41.19 (2m) (d) The department may not, under par. (c), award to an applicant on behalf of an area selected under par. (a) more than one grant per fiscal year to an applicant on behalf of an area under par. (c) and may not or award grants to the applicant for more than 2 fiscal years. Grants awarded to an applicant under par. (c) may not exceed \$25,000 in the first fiscal year, or \$15,000 in the 2nd fiscal year, in which the applicant receives a grant under par. (c).

b2033/1.7 Section 1404. 41.19 (2r) of the statutes is created to read:

41.19 (2r) From the appropriations under s. 20.380 (1) (bm) and (kg), the department may award to a nonprofit organization that is located in an area of the state that was selected under sub. (2m) (a) grants of up to \$5,000 in any fiscal year after the fiscal biennium in which the area was selected under sub. (2m) (a). Grant proceeds must be used to promote historic and prehistoric attractions in the area, and may be used for such purposes as interpretive or directional signs, website development, advertising, and public relations. The department may award grants under this subsection to a nonprofit organization that received grants under sub. (2m) (c) as an applicant on behalf of an area of the state selected under sub. (2m) (a).".

b2221/3.106 **884.** Page 536, line 14: after that line insert:

b2221/3.106 "Section 1405g. 42.09 (2) (b) of the statutes is amended to read: 42.09 (2) (b) The state fair park board shall allow the department of natural resources and the department of forestry access to and use of the buildings, appurtenances, fixtures, exhibits and other structures and facilities described in par.

(a) so that the department departments may prepare, display and dismantle exhibits
during events occurring at state fair park.".

b0866/1.5 885. Page 536, line 19: after that line insert:

b0866/1.5 "Section 1407m. 43.17 (9) (b) of the statutes is amended to read: 43.17 (9) (b) A public library system board of a multicounty library system may borrow money to accomplish any of its purposes, but the outstanding amount of such loans at any time may not exceed an amount equal to the system board's receipts for the prior fiscal year. A federated public library system whose territory lies within 2 or more counties may obtain a state trust fund loan to accomplish any of its purposes, but the outstanding amount of a federated public library system's state trust fund loans, together with all other indebtedness of the system, may not exceed an amount equal to the system's receipts for the prior fiscal year.".

b0957/1.5 886. Page 536, line 19: after that line insert:

b0957/1.5 "Section 1406w. 43.17 (9) (a) of the statutes is amended to read: 43.17 (9) (a) All contracts for public construction made by a federated public library system whose territory lies within 2 or more counties or by a federated public library system whose territory lies within a single county with a population of at least 500,000 shall be let by the public library system board to the lowest responsible bidder, and may be awarded to a minority business that is certified by the department of commerce under s. 560.036 (2), in accordance with s. 62.15 (1) to (11) and (14). For purposes of this section, the system board possesses the powers conferred by s. 62.15 on the board of public works and the common council. All contracts made under this section shall be made in the name of the federated public

1	library system and shall be executed by the system board president and such other
2	board officer as the system board designates.".
3	*b2221/3.107* 887. Page 538, line 5: after that line insert:
4	*b2221/3.107* "Section 1414g. 44.57 (1) (c) of the statutes is amended to read:
5	44.57 (1) (c) Game farms, fish hatcheries, nurseries, and other production
6	facilities operated by the department of natural resources or the department of
7	forestry.".
8	*b0758/1.1* 888. Page 538, line 15: after "sponsor," insert "museum,".
9	*b2193/1.17* 889. Page 538, line 17: delete lines 17 to 18 and substitute
10	"board, the Wisconsin Center for the Blind and Visually Impaired, or the Wisconsin
11	School Educational Services Program for the Deaf and Hard of Hearing.".
12	*b0922/1.3* 890. Page 540, line 14: after "(f)," insert "(im), (jm), (js), and
13	(<u>mp).</u> ".
14	*b2109/1.3* 891. Page 541, line 19: after that line insert:
15	*b2109/1.3* "Section 1426m. 44.72 (3) of the statutes is created to read:
16	44.72 (3) COMPUTER TRAINING. Annually, the board shall pay to the Racine
17	Unified School District the amount appropriated under s. 20.275 (1) (q) for training
18	teachers and pupils in computers, including training in use of the Internet, Web
19	design, computer animation, graphic design, and video skills.".
20	*b0979/1.1* 892. Page 549, line 4: delete "5" and substitute "8".
21	*b0979/1.2* 893. Page 549, line 5: after "providing" insert "direct".
22	*b1524/1.3* 894. Page 551, line 20: after that line insert:
23	*b1524/1.3* "Section 1457m. 45.353 (3) of the statutes is amended to read:

45.353 (3) Application by any such state veterans organization shall be filed annually with the department for the 12-month period commencing on April 1 and ending on March 31 of the year in which it is filed. An application shall contain a statement of salaries and travel expenses paid to employees engaged in veterans claims service maintained at the regional office by such state veterans organization covering the period for which application for a grant is made, which statement has been certified as correct by an a certified public accountant licensed or certified under ch. 442 and sworn to as correct by the adjutant or principal officer of the state veterans organization. The application shall also contain the state organization's financial statement for its last completed fiscal year and such evidence of claims service activity as the department requires. Sufficient evidence shall be submitted with an initial application to establish that the state veterans organization, or its national organization, or both, has maintained a full-time service office at the regional office without interruption throughout 5 years out of the 10-year period immediately preceding such application. Subsequent applications must be accompanied by an affidavit by the adjutant or principal officer of such state veterans organization stating that a full-time service office was maintained at the regional office by such state veterans organization, or by such state organization and its national organization, for the entire 12-month period for which application for a grant is made.".

(21)

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

22

23

b2123/1.2 895. Page 552, line : after that line insert:

b2123/1.2 "SECTION 1461x. 45.365 (1) (am) of the statutes is amended to read:

45.365 (1) (am) The department shall operate the home, and employ a commandant and the officers, nurses, attendants, and other personnel necessary for the proper conduct of the home. The department may employ a commandant for the southeastern facility. In compliance with the compensation plan established pursuant to s. 230.12 (3), the a commandant may recommend to the director of personnel charges for meals, living quarters, laundry, and other services furnished to employees and members of the employees' family maintained at the home and the southeastern facility. Complete personal maintenance and medical care to include programs and facilities that promote comfort, recreation, well-being, or rehabilitation shall be furnished to all members of the home under the policy of the department.

b2123/1.2 Section 1461xf. 45.365 (3) of the statutes is amended to read:

45.365 (3) The A commandant and employees designated by the commandant may summarily arrest all persons within or upon the grounds of the home or southeastern facility who are guilty of any offense against the laws of this state or the rules and regulations governing the home or southeastern facility. For this purpose the a commandant and deputies have the power of constables."

b2123/1.3 896. Page 552, line 22: after that line insert:

b2123/1.3 "Section 1464g. 45.37 (10) (a) of the statutes is amended to read: 45.37 (10) (a) Except as otherwise provided in this subsection, the application and admission of any applicant admitted under this section shall constitute a valid and binding contract between such a member and the department. If a member dies leaving a relative that is entitled to an interest in the property of the member under the rules of intestate succession or a will the existence of which is made known to the

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

commandant of the home within 60 days of such the member's death, the member's property shall constitute a part of the member's estate, except that personal effects of nominal monetary value of such a deceased member who is not survived by a member spouse may be distributed by the commandant of the home or the southeastern facility to surviving relatives of such the member who request such the personal effects within a reasonable time after such the member's death.

b2123/1.3 Section 1464i. 45.37 (11) of the statutes is amended to read:

45.37 (11) DISPOSITION OF PROPERTY DESCENDING TO STATE. If a member dies without a relative that is entitled to an interest in the property of the member under the rules of intestate succession and without leaving a will the existence of which is made known to the commandant of the home or the southeastern facility, within 60 days of the member's death, the member's property shall be converted to cash and turned over by the commandant of the home or the southeastern facility, to the state treasurer to be paid into the appropriation under s. 20.485 (1) (h), without administration. The amount is subject to refund within 6 years to the estate of a veteran if it is subsequently discovered that the veteran left a will or a relative that is entitled to an interest in the property of the member under the rules of intestate succession or to any creditor of the veteran who establishes right to the fund or property or any portion thereof. The department, upon being satisfied that a claim out of such funds or property is legal and valid, shall pay the same out of such funds or property, except that payment of claims for a member's funeral and burial expenses may not exceed a total of \$1,500 including any amount allowed by the United States for the member's funeral and burial and the right for burial and interment provided in sub. (15) (a).

b2123/1.3 Section 1464L. 45.37 (14) of the statutes is amended to read:

1	45.37 (14) POWERS OF COMMANDANT OVER PERSONAL FUNDS OF MEMBERS. The
2	commandant of the home may receive, disburse, and account for funds of members
3	of the home.".
4	*b0979/1.3* 897. Page 554, line 21: after "are" insert "not".
5	*b0979/1.4* 898. Page 554, line 23: delete the material beginning with "No"
6	and ending with "\$1,000" on line 24 and substitute "The grants may be used to
7	support multi-county cooperative transportation services".
8	*b0979/1.5* 899. Page 555, line 1: delete lines 1 to 5.
9	*b0979/1.6* 900. Page 555, line 6: delete "(c)" and substitute "(b)".
10	*b0979/1.7* 901. Page 555, line 8: delete "(d)" and substitute "(c)".
11)	*b2012/2.3* 902. Page 559, line : which that line insert:
12	*b2012/2.3* "SECTION 1483j. 46.03 (44) of the statutes is created to read:
13	46.03 (44) Performance evaluations for alcohol and other drug abuse
14	INTERVENTION AND TREATMENT SERVICES. Promote efficient use of resources for alcohol
15	and other drug abuse intervention and treatment services by doing all of the
16	following:
17	(a) Developing one or more methods to evaluate the effectiveness of, and
18	developing performance standards for, alcohol and other drug abuse intervention
19	and treatment services that are administered by the department.
2 0	(b) Adopting policies to ensure that, to the extent possible under state and
21	federal law, funding for alcohol and other drug abuse intervention and treatment
22	services that are administered by the department is distributed giving primary
23	consideration to the effectiveness of the services in meeting department performance
24	standards for alcohol and other drug abuse services.

1	(c) Requiring every application for funding from the department for alcohol and
2	other drug abuse intervention or treatment services to include a plan for the
3	evaluation of the effectiveness of the services in reducing alcohol and other drug
4	abuse by recipients of services.
5	(d) Requiring every person receiving funding from the department for alcohol
6	and other drug abuse intervention or treatment services to provide the department
7	the results of the evaluation conducted under par. (c).".
8	*b2051/3.5* 903. Page 559, line 14: delete that line and substitute:
9	*b2051/3.5* "Section 1483gb. 46.03 (43) of the statutes is amended to read:
10	46.03 (43) Compulsive gambling awareness campaigns. Provide From the
11	appropriation account under s. 20.435 (7) (kg), provide grants to one or more
12	individuals or organizations in the private sector to conduct compulsive gambling
13	awareness campaigns.".
14	*b2193/1.18* 904. Page 562, line 15: after that line insert:
15	*b2193/1.18* "Section 1489m. 46.041 (1) (a) of the statutes is amended to
16	read:
17	46.041 (1) (a) Provide for the temporary residence and evaluation of children
18	referred from courts assigned to exercise jurisdiction under chs. 48 and 938, the
19	institutions and services under the jurisdiction of the department, University of
20	Wisconsin Hospitals and Clinics Authority, county departments under s. 46.215,
21	46.22 or 46.23, private child welfare agencies, the Wisconsin School Educational
22	Services Program for the Deaf and Hard of Hearing, the Wisconsin Center for the
23	Blind and Visually Impaired, and mental health facilities within the state at the

discretion of the director of the institution providing services under this section.".

1	*b1844/2.2* 905. Page 565, line 4: after that line insert:
2	*b1844/2.2* "Section 1502L. 46.27 (3) (f) of the statutes is amended to read
3	46.27 (3) (f) Beginning on January 1, 1996, from the annual allocation to the
4	county for the provision of long-term community support services under subs. (7) (b)
5	and (11), annually establish a maximum total amount that may be encumbered in
6	a calendar year for services for eligible individuals in community-based residential
7	facilities, unless the department waives the requirement under sub (2) (i) or
8	approves a request for an exception under sub. (6r) (c).
9	*b1844/2.2* Section 1502n. 46.27 (7) (cm) 1. (intro.) of the statutes is
10	amended to read:
11	46.27 (7) (cm) 1. (intro.) Except as provided sub. (7b), beginning Beginning on
12	January 1, 1996, no county, private nonprofit agency or aging unit may use funds
13	received under par. (b) to provide services in any community-based residential
14	facility that has more than 820 beds, unless one of the following applies:
15	*b1844/2.2* Section 1502p. 46.27 (7) (cm) 1. c. of the statutes is amended to
16	read:
17	46.27 (7) (cm) 1. c. The department approves the provision of services in a
18	community-based residential facility that is initially licensed after July 29, 1995,
19	that is licensed for more than 20 or fewer beds and that meets standards established
20	under subd. 2.
21	*b1844/2.2* Section 1502r. 46.27 (7b) of the statutes is repealed.".
22	*b1844/2.3* 906. Page 565, line 20: after that line insert:
23	*b1844/2.3* "Section 1504r. 46.27 (11) (c) 5p. of the statutes is repealed.".
24	*b1844/2.4* 907. Page 565, line 21: delete lines 21 to 24 and substitute:

1	* b1844/2.4 * "Section 1505b. 46.27 (11) (c) 6. (intro.) and a. of the statutes are	
2	consolidated, renumbered 46.27 (11) (c) 6. a. and amended to read:	
3	46.27 (11) (c) 6. a. No county, private nonprofit agency or aging unit may use	
4	funds received under this subsection to provide residential services in any	
5	community-based residential facility, as defined in s. 50.01 (1g), or a group home, as	
6	defined in s. 48.02 (7), that has more than 4 5 beds, unless one of the following	
7	applies: a. The the department approves the provision of services in a	
8	community-based residential facility or group home that has 5 6 to 8 beds.	
9	*b1844/2.4* Section 1505d. 46.27 (11) (c) 6. b. of the statutes is repealed and	
10	recreated to read:	
11	46.27 (11) (c) 6. b. No county, private nonprofit agency, or aging unit may use	
12	funds received under this subsection to provide residential services in a	
13	community-based residential facility, as defined in s. 50.01 (1g), that has more than	
14	20 beds, unless the requirements of sub. (7) (cm) 1. a., b., or c. are met.".	
15	*b1844/2.5* 908. Page 566, line 14: after that line insert:	
16	*b1844/2.5* "Section 1507s. 46.277 (5) (d) 1m. (intro.) of the statutes is	
17	amended to read:	
18	46.277 (5) (d) 1m. (intro.) No county may use funds received under this section	
19	to provide services to a person who does not live in his or her own home or apartment	
20	unless, subject to the limitations under subds. 2. and, 3., and 4. and par. (e), one of	
21	the following applies:	
22	*b1844/2.5* Section 1507t. 46.277 (5) (d) 1n. (intro.) of the statutes is	
23	amended to read:	

1	46.277 (b) (d) In. (intro.) A county may also use funds received under this
2	section, subject to the limitations under subds. 2. and, 3., and 4. and par. (e), to
3	provide services to a person who does not live in his or her own home or apartment
4	if the services are provided to the person in a community-based residential facility
5	and the county department or aging unit has determined that all of the following
6	conditions have been met:
7	*b1844/2.5* SECTION 1507u. 46.277 (5) (d) 2. (intro.) of the statutes is amended
8	to read:
9	46.277 (5) (d) 2. (intro.) No county may use funds received under this section
10	to provide residential services in any community-based residential facility, as
11	defined in s. 50.01 (1g), or group home, as defined in s. 48.02 (7), that has more than
12	4 beds, unless one of the following applies:".
13	*b1844/2.6* 909. Page 566, line 15: delete lines 15 to 18 and substitute:
14	*b1844/2.6* "SECTION 1508b. 46.277 (5) (d) 2. a. of the statutes is repealed and
15	recreated to read:
16	46.277 (5) (d) 2. a. The requirements of s. 46.27 (7) (cm) 1. a. or c. are met.
17	*b1844/2.6* Section 1508d. 46.277 (5) (d) 4. of the statutes is created to read:
18	46.277 (5) (d) 4. No county may use funds received under this section to provide
19	residential services in a group home, as defined in s. 48.02 (7), that has more than
20	5 beds, unless the department approves the provision of services in a group home that
21	has 6 to 8 beds.".
22)	*b1402/1.2* 910. Page 566, line 43: After that line insert:
23	*b1402/1.2* "Section 1508rg. 46.278 (title) and (1) of the statutes are
24	amended to read:

 $\mathbf{2}$

46.278 (title) Cor	nmunity integration progr	ram <u>and brain injury waiver</u>
program for persons	with mental retardation	developmental disabilities.

(1) Legislative intent. The intent of the program programs under this section is to provide home or community-based care to serve in a noninstitutional community setting a person who meets eligibility requirements under 42 USC 1396n (c) and who is diagnosed as developmentally disabled under the definition specified in s. 51.01 (5) and relocated from an institution other than a state center for the developmentally disabled or who meets the intermediate care facility for the mentally retarded or a brain injury rehabilitation facility level of care requirements for medical assistance reimbursement in an intermediate care facility for the mentally retarded or brain injury rehabilitation facility and is ineligible for services under s. 46.275 or 46.277. The intent of the program is also that counties use all existing services for providing care under this section, including those services currently provided by counties.

b1402/1.2 Section 1508rh. 46.278 (1m) (a) of the statutes is created to read: 46.278 (1m) (a) "Brain injury rehabilitation facility" means a nursing facility or hospital designated as a facility for brain injury rehabilitation by the department under the approved state medicaid plan.

b1402/1.2 Section 1508ri. 46.278 (1m) (c) of the statutes is amended to read:

46.278 (1m) (c) "Program" means the community integration program or the brain injury waiver program, for facilities certified as medical assistance providers, for which a waiver has been received under sub. (3).

b1402/1.2 Section 1508rj. 46.278 (2) (a) of the statutes is amended to read:

1	46.278 (2) (a) The department may request a waiver one or more waivers from
2	the secretary of the federal department of health and human services, under 42 USC
3	1396n (c), authorizing the department to serve medical assistance recipients, who
4	meet the level of care requirements for medical assistance reimbursement in an
5	intermediate care facility for the mentally retarded or in a brain injury rehabilitation
6	facility, in their communities by providing home or community-based services as
7	part of medical assistance. If the department requests a waiver, it shall include all
8	assurances required under 42 USC 1396n (c) (2) in its request.
9	*b1402/1.2* Section 1508rk. 46.278 (3) (a) of the statutes is amended to read:
10	46.278 (3) (a) Evaluate the effect of the each program on medical assistance
11	costs and on the program's ability to provide community care alternatives to
12	institutional care in facilities certified as medical assistance providers.
13	*b1402/1.2* SECTION 1508rL. 46.278 (4) (a) of the statutes is amended to read:
14	46.278 (4) (a) Sections 46.27 (3) (b) and 46.275 (3) (a) and (c) to (e) apply to
15	county participation in this a program, except that services provided in the program
16	shall substitute for care provided a person in an intermediate care facility for the
17	mentally retarded or brain injury rehabilitation facility who meets the intermediate
18	care facility for the mentally retarded or brain injury rehabilitation facility level of
19	care requirements for medical assistance reimbursement to that facility rather than
20	for care provided at a state center for the developmentally disabled.
21	*b1402/1.2* Section 1508rm. 46.278 (4) (b) 2. of the statutes is amended to
22	read:
23	46.278 (4) (b) 2. Each county department participating in the a program shall
24	provide home or community-based care to persons eligible under this section, except
25	that the number of persons who receive home or community-based care under this

section may not exceed the number that are approved under the <u>an applicable</u> waiver received under sub. (3).

b1402/1.2 Section 1508rn. 46.278 (5) (a) and (b) of the statutes are amended to read:

46.278 (5) (a) Any medical assistance recipient who meets the level of care requirements for medical assistance reimbursement in an intermediate care facility for the mentally retarded or in a brain injury rehabilitation facility and is ineligible for service under s. 46.275 or 46.277 is eligible to participate in the a program, except that persons eligible for the brain injury waiver program must meet the definition of brain injury under s. 51.01 (2g), and except that the number of participants may not exceed the number approved under the waiver received under sub. (3). Such a recipient may apply, or any person may apply on behalf of such a recipient, for participation in the a program. Section 46.275 (4) (b) applies to participation in the a program.

(b) To the extent authorized under 42 USC 1396n, if a person discontinues participation in the a program, a medical assistance recipient may participate in the a program in place of the participant who discontinues if that recipient meets the intermediate care facility for the mentally retarded level of care requirements for medical assistance reimbursement in an intermediate care facility for the mentally retarded except that the number of participants concurrently served may not exceed the number approved under the waiver received under sub. (3) requirements under par. (a).

b1402/1.2 SECTION 1508rp. 46.278 (6) (a), (b) and (c) of the statutes are amended to read:

. 1	46.278 (6) (a) The provisions of s. 46.275 (5) (a), (b) and (d) apply to funding
2	received by counties under the program programs.
3	(b) Total funding to counties for relocating each person under the a program
4	may not exceed the amount approved in the waiver received under sub. (3).
5	(c) Funding may be provided under the a program for services of a family
6	consortium.".
7	*b1402/1.3* 911. Page 566, line 21: delete "the waiver" and substitute "the
8	a waiver".
9	*b1402/1.4* 912. Page 566, line 25: after that line insert:
10	*b1402/1.4* "Section 1509g. 46.278 (6) (e) 1. of the statutes is amended to
11	read:
12	46.278 (6) (e) 1. The department may provide enhanced reimbursement for
13	services under the community integration program for an individual who was
14	relocated to the community by a county department from one of the following:
15	*b1402/1.4* Section 1509h. 46.278 (6) (f) of the statutes is amended to read:
16	46.278 (6) (f) If a county owns the institution or intermediate care facility for
17	the mentally retarded from which an individual is relocated to the community under
18	this section, in order to receive funding under the community integration program,
19	the county shall submit a plan for delicensing a bed of the institution or intermediate
20	care facility for the mentally retarded that is approved by the department.".
21	*b2046/3.4* 913. Page 571, line 2: after that line insert:
22	
- - 23	*b2046/3.4* "Section 1557b. 46.45 (2) (a) of the statutes, as affected by 1999
	Wisconsin Act 9, is amended to read:

46.45 (2) (a) If on December 31 of any year there remains unspent or
unencumbered in the allocation under s. 46.40 (2) an amount that exceeds the
amount received under 42 USC 670 to 679a and allocated under s. 46.40 (2) in that
year, the department shall carry forward the excess moneys and distribute not less
than 50% of the excess moneys to counties having a population of less than $500,000$
that are making a good faith effort, as determined by the department, to comply with
s. 46.22 (1) (c) 8. f. for services and projects to assist children and families,
notwithstanding the percentage limit specified in sub. (3) (a). A county shall use not
less than 50% of the moneys distributed to the county under this subsection for
services for children who are at risk of abuse or neglect to prevent the need for child
abuse and neglect intervention services, except that in the calendar year in which
a county achieves compliance with s. 46.22 (1) (c) 8. f. and in the 2 calendar years after
that calendar year the county may use 100% of the moneys distributed under this
paragraph to reimburse the department for the costs of achieving that compliance.
If a county does not comply with s. 46.22 (1) (c) 8. f. before July 1, 2005, the
department may recover any amounts distributed to that county under this
paragraph after June 30, 2001, by billing the county or deducting from that county's
allocation under s. 46.40 (2). All moneys received by the department under this
paragraph shall be credited to the appropriation account under s. 20.435 (3) (j).".

b2063/2.1 914. Page 571, line 2: after that line insert:

b2063/2.1 "**Section 1556d.** 46.40 (9) (a) (intro.) of the statutes is amended to read:

46.40 (9) (a) Transfer to family care program and adult protective services allocation. (intro.) If a care management organization under s. 46.285 46.284 is

available in a county, the department may dispose of the amount allocated under sub. (8) to that county and not more than 21.3% of the amount allocated under sub. (2) to that county as follows; and, of the amount allocated under sub. (8), may dispose of the lesser of up to 60% or the amount remaining after subtracting an amount necessary to maintain funding for recipients under sub. (8) who, on the effective date of this paragraph [revisor inserts date], are ineligible for the family care benefit under s. 46.286, to that county, as follows:"

1

2

3

4

5

6

7

b1031/1.2 915. Page 571, line 3: delete lines 3 to 10 and substitute:

b1031/1.2 "SECTION 1557jd. 46.46 (1) of the statutes is required 46.46 AMamended to read:

11 12

10

46.46 Expenditure of income augmentation services receiptly From the appropriation account under s. 20.435 (8) (mb), the department shall support costs that are exclusively related to the operational costs of augmenting itself perform activities to augment the amount of moneys received under 42 USC 670 to 679a, 42

15 16

13

14

USC 1395 to 1395ddd and 42 USC 1396 to 1396v In addition, the department may expend moneys from the appropriation account under s. 20.435 (8) (mb) as provided

in sub. (2). The department may not contract with any person to perform those

B 202046/3.5* 916. Page 571, line & MANA Mand and Mound substitute 1396 for 1900co. The 1900co.

to 13960, In addition the department may expend moneys the received under 42 USC 1396 to 1396v in reimbursement of the cost of providing targeted case

management services to children whose care is not eligible for reimbursement under

42 USC 670 to 679a and credited to the appropriation account under s. 20.435 (8)

appropriation account unders. 20.435 (8) (mb) for the augmentation activities specified in sub (1),

	2001 – 2002 Legislature = 297 ALL:ALL:ALL
Not 1	(mb) to support the counties' share of implementing the
\bigcirc \bigcirc \bigcirc	statewide automated child welfare information system under s. 46.22 (1) (c) 8. f.".
3	*b0916/1.2* 917. Page 571, line 11: after that line insert:
4	*b0916/1.2* "Section 1557v. 46.48 (6) of the statutes is amended to read:
5	46.48 (6) Career youth development center. The department shall distribute
6	$\$80,000 \ \$110,000$ in each fiscal year to the career youth development center in the
7	city of Milwaukee. Of those amounts, \$80,000 shall be distributed in each fiscal year
8	for the operation of a minority youth substance abuse treatment program and
9	\$30,000 shall be distributed in each fiscal year for drug prevention and intervention
10	programs for middle school and high school athletes in the Milwaukee public schools
11	system.".
12	*b2067/2.2* 918. Page 571, line 13: delete the material beginning with that
13	line and ending with page 572, line 3.
14	*b1036/1.1* 919. Page 573, line 14: after "and." insert "A grant recipient
15	under this section may include only a nonprofit, tax-exempt corporation, as defined
16	in s. 49.134 (1) (c), or a county.".
17	*b1043/1.2* 920. Page 574, line 4: after that line insert:
18	*b1043/1.2* "Section 1563d. 46.56 (3) (b) 6. of the statutes is amended to read

b1043/1.2 "Section 1563d. 46.56 (3) (b) 6. of the statutes is amended to read: 46.56 (3) (b) 6. Representatives of the county health department, as defined in s. 251.01 (2) established under s. 251.02 (1) or city-county health department

established under s. 251.02 (1m).".

19

20

21

22

23

24

b2025/2.3 921. Page 574, line 4: after that line insert:

b2025/2.3 "Section 1568c. 46.766 of the statutes is created to read:

46.766 Food pantry grants. (1) In this section:

, 1	(a) "Nonprofit organization" means an organization described in section 501 (c)
2	of the Internal Revenue Code.
3	(b) "Rural" means outside a metropolitan statistical area specified under 42
4	CFR 412.62 (ii) (A) or within a metropolitan statistical area but isolated from an
5	urban center.
6	(2) (a) From the appropriation under s. 20.435 (3) (fp), the department shall
7,	provide annual grants to food pantries that meet the eligibility requirements under
8	sub. (4). The amount of each grant awarded to a food pantry shall be in proportion
9	to the number of persons served by the food pantry.
10	(b) The department shall allocate 25% of the amounts appropriated under s.
11	20.435 (3) (fp) for grants to rural food pantries. The department shall allocate the
12	remainder of the amounts available for grants under s. 20.435 (3) (fp) for grants to
13	all food pantries. If, after awarding the grants to rural food pantries, any of the
14	moneys remain unallocated, the department shall distribute the unallocated
15	amounts for grants to all food pantries in proportion to the number of persons served
16	by those food pantries.
17	(c) The total amount of all grants awarded annually to each food pantry under
18	this section may not exceed \$15,000.
19	(3) Grants awarded under this section may be used for any of the following
20	purposes:
21	(a) The purchase, storage, transportation, coordination, or distribution of food
22	to needy households.
23	(b) The administration of emergency food distribution.

(c) The purchase of capital equipment.

24

1	(d) Programs designed to increase food availability to needy households or
2	enhance food security.
3	(e) Nutrition education and outreach.
4	(f) Technical assistance related to food pantry management.
5	(4) A food pantry is eligible for a grant under this section if the food pantry
6	meets all of the following requirements:
7	(a) The food pantry applies for a grant on an application developed by the
8	department. The application may not exceed one page.
. 9	(b) The food pantry is a nonprofit organization or is affiliated with a nonprofit
10	organization.
11	(c) The food pantry distributes food packages directly, without charge, to needy
12	households.
13	(d) The food pantry is open to the general public in its service area.
14	(e) The food pantry does not base food distribution on any criteria other than
15	need of the recipient, except to the extent necessary for the orderly and fair
16	distribution of food.
17	(f) The food pantry has a permanent address, regular hours of operation, and
18	is open at least one day per month.
19	(g) The food pantry adheres to the U.S. department of agriculture food safety
20	and food storage standards.
21	(5) The department may not use more than 5% of the total amount
22	appropriated under s. 20.435 (3) (fp) for administration of the grant program under
23	this section.
24	(6) A food pantry that receives a grant under this section shall, not later than

60 days after the end of the grant period, submit a report, not longer than 3 pages,

23

24

1	to the department in the manner prescribed by the department, that describes how
2	the grant money was used by the food pantry. The department shall compile the
3	reports and submit the compiled reports to the legislature under s. 13.172 (2).".
4	*b2098/1.4* 922. Page 574, line 4: after that line insert:
5	*b2098/1.4* "Section 1568b. 46.858 of the statutes is created to read:
6	46.858 Publicity for Alzheimer's disease registration program. (1) In
7	this section, "Alzheimer's disease" has the meaning given in s. 46.87 (1) (a).
8	(2) From the appropriation under s. 20.435 (6) (a), the department shall engage
9	in activities to publicize the existence of a program administered by a
10	nongovernmental entity that registers persons with Alzheimer's disease or other
11	related dementias in a national database and provides the persons identification
12	products in order to facilitate the safe return to caregivers of persons who have
13	Alzheimer's disease or other related dementias and who have become lost or have
14	wandered.".
15	*b2063/2.2* 923. Page 574, line 18: after that line insert:
16	*b2063/2.2* "Section 1568mg. 46.87 (5) (a) 3. of the statutes is amended to
17	read:
18	46.87 (5) (a) 3. The household meets financial eligibility requirements specified
19	by the department by rule, and persons in the household are ineligible for the family
20	care benefit under s. 46.286 in a county in which a care management organization
21	under s. 46.284 operates.
22	*b2063/2.2* Section 1568mh. 46.87 (5) (b) of the statutes is amended to read:
23	46.87 (5) (b) Provide or contract for the provision of services and goods or make
24	payments for services to persons a person with Alzheimer's disease living in a

1	residential facilities facility in the county who meet meets financial eligibility
2	requirements specified by the department by rule and is ineligible for the family care
3	benefit under s. 46.286 in a county in which a care management organization under
4	<u>s. 46.284 operates.".</u>
5	*b1428/1.1* 924. Page 576, line 21: after that line insert:
6	*b1428/1.1* "Section 1578. 48.21 (5) (b) of the statutes is renumbered 48.21
7	(5) (b) (intro.) and amended to read:
8	48.21 (5) (b) (intro.) An order relating to a child held in custody outside of his
9	or her home shall also describe include all of the following:
10	1. A description of any efforts that were made to permit the child to remain
11	safely at home and the services that are needed to ensure the child's well-being, to
12	enable the child to return safely to his or her home, and to involve the parents in
13	planning for the child.
14	*b1428/1.1* Section 1579. 48.21 (5) (b) 2. of the statutes is created to read:
15	48.21 (5) (b) 2. If the child is held in custody outside the home in a placement
16	recommended by the intake worker, a statement that the court approves the
17	placement recommended by the intake worker or, if the child is placed outside the
18	home in a placement other than a placement recommended by the intake worker, a
19	statement that the court has given bona fide consideration to the recommendations
20	made by the intake worker and all parties relating to the placement of the child.".
21	*b1827/1.1* 925. Page 576, line 21: after that line insert:
22	
	b1827/1.1 "SECTION 1577g. 48.02 (15) of the statutes is amended to read:

1	48.02 (15) "Relative" means a parent, grandparent, greatgrandparent,
2	stepparent, brother, sister, first cousin, nephew, niece, uncle, or aunt. This
3	relationship shall be by blood, marriage, or adoption.".
4	*b1428/1.2* 926. Page 576, line 24: after that line insert:
5	*b1428/1.2* "Section 1583. 48.355 (2) (b) 6m. of the statutes is created to read:
6	48.355 (2) (b) 6m. If the child is placed outside the home in a placement
7	recommended by the agency designated under s. 48.33 (1), a statement that the court
8	approves the placement recommended by the agency or, if the child is placed outside
9	the home in a placement other than a placement recommended by that agency, a
10	statement that the court has given bona fide consideration to the recommendations
11	made by the agency and all parties relating to the child's placement.
12	*b1428/1.2* Section 1584. 48.357 (2v) of the statutes is created to read:
13	48.357 (2v) If a hearing is held under sub. (1) or (2m) and the change in
14	placement would place the child outside the home in a placement recommended by
15	the person or agency primarily responsible for implementing the dispositional order,
16	the change in placement order shall include a statement that the court approves the
17	placement recommended by that person or agency or, if the child is placed outside the
18	home in a placement other than a placement recommended by that person or agency,
19	a statement that the court has given bona fide consideration to the recommendations
20	made by that person or agency and all parties relating to the child's placement.".

b0924/2.1 927. Page 576, line 25: delete that line.

21

22

23

24

b1993/2.1 928. Page 576, line 25: defete that line

b0924/2.2 929. Page 577, line 1: delete lines 1 to 12 and substitute:

b0924/2.2 "Section 1585d. 48.366 (8) of the statutes is amended to read:

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

48.366 (8) Transfer to or between facilities. The department of corrections may transfer a person subject to an order between secured correctional facilities. After the person attains the age of 17 years, the department of corrections may place the person in a state prison named in s. 302.01, except that the department of corrections may not place any person under the age of 18 years in the correctional institution authorized in s. 301.16 (1n). If the person is 15 years of age or over, the department of corrections may transfer the person to the Racine youthful offender correctional facility named in s. 302.01 as provided in s. 938.357 (4) (d). If the department of corrections places a person subject to an order under this section in a state prison, that department shall provide services for that person from the appropriate appropriation under s. 20.410 (1). The department of corrections may transfer a person placed in a state prison under this subsection to or between state prisons named in s. 302.01 without petitioning for revision of the order under sub. (5) (a), except that the department of corrections may not transfer any person under the age of 18 years to the correctional institution authorized in s. 301.16 (1n).".

b1993/2.2 930. Page 577, line 1: delete lines 1 to 12/

b1430/2.1 931. Page 583, line 2: after that line insert:

b1430/2.1 "Section 1636d. 48.67 of the statutes is amended to read:

48.67 Rules governing child welfare agencies, day care centers, foster homes, treatment foster homes, group homes, shelter care facilities and county departments. The department shall promulgate rules establishing minimum requirements for the issuance of licenses to, and establishing standards for the operation of, child welfare agencies, day care centers, foster homes, treatment foster homes, group homes, shelter care facilities, and county departments. These

rules shall be designed to protect and promote the health, safety, and welfare of the
children in the care of all licenses my
children in the care of all licensees. The department shall consult with the
department of commerce and the department of public instruction before
promulgating these rules. <u>In establishing the minimum requirements</u> for the
issuance of licenses to day care centers that provide care and supervision for children
under one year of age, the department shall include a requirement that all licensees
who are individuals and all employees and volunteers of a licensee who provide care
and supervision for children receive, before the date on which the license is issued
or the employment or volunteer work commences, whichever is applicable, training
in the most current medically accepted methods of preventing sudden infant death
syndrome.".
b1827/1.2 932. Page 583, line 2: after that line insert:
b1827/1.2 "Section 1651g. 48.981 (1) (am) 1 of the statutes in

b1827/1.2 "Section 1651g. 48.981 (1) (am) 1. of the statutes is amended to read:

48.981 (1) (am) 1. The child's parent, grandparent, greatgrandparent, stepparent, brother, sister, stepbrother, stepsister, half brother, or half sister.

b1827/1.2 SECTION 1651h. 48.981 (1) (fm) of the statutes is amended to read:

48.981 (1) (fm) "Relative" means a parent, grandparent, greatgrandparent, stepparent, brother, sister, first cousin, 2nd cousin, nephew, niece, uncle, aunt, stepgrandparent, stepbrother, stepsister, half brother, half sister, brother-in-law, sister-in-law, stepuncle, or stepaunt.".

b0909/3.1 933. Page 586, line 13: after that line insert:

b0909/3.1 "Section 1656h. 48.985 (5) of the statutes is created to read:

1	40 005 (E) M
	wedfare Alds. Of the amounts received under 42
2	USC 620 to 626 and credited to the appropriation account under s. 20.435 (3) (nL)
3	the department shall transfer \$58,600 in fiscal year 2001-02 and \$66,800 in fiscal
4	year 2002-03 to the appropriation account under s. 20.435 (3) (kw) and shall expend
5	those moneys to provide services to children and families under s. 48.48 (17).".
6	*b2181/1.1* 934. Page 586, line 13: after that line insert:
7	*b2181/1.1* "Section 1656d. 49.027 (2) (a) (intro.) of the statutes is amended
8	to read:
9	49.027 (2) (a) (intro.) If a county is eligible to receive a relief block grant in a
10	year, the department shall pay to the county, in accordance with s. 49.031 and subject
11	to par. (c), from the appropriation under s. 20.435 (4) (bt), an amount for that year
12	determined as follows:
13	*b2181/1.1* Section 1656dd. 49.027 (2) (a) 1. of the statutes is repealed.
14	*b2181/1.1* Section 1656dg. 49.027 (2) (a) 3. of the statutes is repealed.
15	*b2181/1.1* Section 1656di. 49.027 (2) (a) 4. of the statutes is amended to
16	read:
17	49.027 (2) (a) 4. From the amount determined under subd. 3. 2., the department
18	shall subtract amounts paid to hospitals in that county under s. 49.45 (6y) and (6z)
19	for that calendar year.
20	*b2181/1.1* Section 1656dL. 49.027 (2) (c) of the statutes is created to read:
21	49.027 (2) (c) If sufficient funds are not available to pay all of the relief block
22	grants calculated under par. (a), the department shall prorate the available funds
23	among the eligible counties in proportion to the amounts calculated under par. (a).".
	2 1 state amounts calculated under par. (a).".

1	*b1994/8.37* 935. Page 586, line 14: delete "Section 1656tym" and
2	substitute "Section 1656sy".
	****Note: Corrects numbering.
3	*b0903/1.1* 936. Page 596, line 2: delete "Transfer of funding allocations
4	PROHIBITED." and substitute "Contract prohibitions. (a)".
5	*b0903/1.2* 937. Page 596, line 6: delete "(a)" and substitute "1.".
6	*b0903/1.4* 938. Page 596, line 7: after that line insert:
7	"(b) No Wisconsin works agency may expend moneys that are provided under
8	a contract under sub. (1) to conduct public relations activities unless the public
9	relations activities are directly related to providing community outreach and
10	informing participants about the services available under Wisconsin works.".
11	*b0903/1.3* 939. Page 596, line 7: delete "(b)" and substitute "2.".
12	*b2021/1.1* 940. Page 597, line 3: after that line insert:
13	*b2021/1.1* *SECTION 1660hb. 49.145 (3) (b) 1. of the statutes is amended to
14	read:
15	49.145 (3) (b) 1. All earned and unearned income of the individual, except any
16	amount received under section 32 of the internal revenue code Internal Revenue
17	Code, as defined in s. 71.01 (6), any amount received under s. 71.07 (9e), any payment
18	made by an employer under section 3507 of the internal revenue code Internal
19	Revenue Code, as defined in s. 71.01 (6), any student financial aid received under any
20	federal or state program, any scholarship used for tuition and books, and any
21	assistance received under s. 49.148. In determining the earned and unearned
22	income of the individual, the Wisconsin works agency may not include income earned
23	by a dependent child of the individual.

b2021/1.1 Section 1660jk. 49.147 (4) (am) of the statutes is amended to read:

49.147 (4) (am) Education or training activities. A participant under this subsection may be required to participate in education and training activities assigned as part of an employability plan developed by the Wisconsin works agency. The department shall establish by rule permissible education and training under this paragraph, which shall include a course of study meeting the standards established under s. 115.29 (4) for the granting of a declaration of equivalency of high school graduation, technical college courses, employer—sponsored training, and educational courses that provide an employment skill. Permissible education under this paragraph shall also include English as a 2nd language courses that the Wisconsin works agency determines would facilitate an individual's efforts to obtain employment and adult basic education courses that the Wisconsin works agency determines would facilitate an individual's efforts to obtain

b2021/1.1 **Section 1660jv.** 49.147 (5) (bm) of the statutes is amended to read:

49.147 (5) (bm) Education or training activities. A participant under this subsection may be required to participate in education and training activities assigned as part of an employability plan developed by the Wisconsin works agency. The department shall establish by rule permissible education and training under this paragraph, which shall include a course of study meeting the standards established under s. 115.29 (4) for the granting of a declaration of equivalency of high school graduation, technical college courses, employer—sponsored training, and educational courses that provide an employment skill. Permissible education under this paragraph shall also include English as a 2nd language courses that the

1	Wisconsin works agency determines would facilitate an individual's efforts to obtain
2	employment and adult basic education courses that the Wisconsin works agency
3	determines would facilitate an individual's efforts to obtain employment.".

b2022/2.1 941. Page 597, line 3: after that line insert:

b2022/2.1 "Section 1660p. 49.1473 of the statutes is created to read:

49.1473 Wisconsin works; domestic abuse screening and training. (1)

(a) The department shall promulgate rules for screening victims of domestic abuse and for the training of Wisconsin works agency employees in domestic abuse issues. The rules shall allow an individual to voluntarily and confidentially disclose that he or she is or has been a victim of domestic abuse or is at risk of further domestic abuse. The rules shall also specify the evidence that is sufficient to establish that an individual is or has been a victim of domestic abuse or is at risk of further domestic abuse.

- (b) Each Wisconsin works agency shall establish procedures, in accordance with the rules promulgated by the department under par. (a), for screening victims of domestic abuse.
- (2) If a Wisconsin works agency employee identifies an individual as a past or present victim of domestic abuse or determines that the individual is at risk of domestic abuse or if the individual identifies himself or herself as a past or present victim of domestic abuse or as an individual who is at risk of further abuse, the Wisconsin works agency shall provide the individual with information on community—based domestic abuse services, including information on shelters or programs for battered individuals, sexual assault provider services, medical services, sexual assault nurse examiners services, domestic violence and sexual

assault hotlines, legal and medical counseling and advocacy, mental health care, counseling, and support groups. The Wisconsin works agency shall provide the information to the individual orally and in writing in accordance with guidelines developed by the department. The Wisconsin works agency shall also provide referrals for community—based counseling and supportive service providers to the individual if the individual elects to receive the services.".

b1430/2.2 942. Page 597, line 6: after that line insert:

b1430/2.2 "Section 1660y. 49.155 (1d) (a) of the statutes is amended to read: 49.155 (1d) (a) The department shall promulgate rules establishing standards for the certification of child care providers under s. 48.651. In establishing the requirements for certification under this paragraph of a child care provider who provides care and supervision for children under one year of age, the department shall include a requirement that all providers and all employees and volunteers of a provider who provide care and supervision for children receive, before the date on which the provider is certified or the employment or volunteer work commences, whichever is applicable, training in the most current medically accepted methods of preventing sudden infant death syndrome. In establishing the requirements for certification as a Level II certified family day care provider, the department may not include a any other requirement for training for providers."

b2018/2.7 943. Page 601, line 2: after that line insert:

b2018/2.7 "Section 1676n. 49.173 (title) of the statutes is amended to read:

49.178 (title) Workforce attachment and advancement program.".

b2023/3.3 944. Page 601, line 5: delete "(br)," and substitute "(br),".

b2096/2.1 945. Page 602, line 6: delete lines 6 to 22 and substitute:

1	*b2096/2.1* "Section 1682bc. 49.175 (1) (d) of the statutes is repealed and
2	recreated to read:
3	49.175 (1) (d) Community reinvestment. 1. 'Contracts for 1997 to 1999'. For
4	the payment of community reinvestment funds that are earned as part of contracts
5	entered into under s. 49.143 having a term that begins on September 1, 1997, and
$\binom{6}{}$	ends on December 1999, \$20,849,000 in fiscal year 2001–02.
7	2. 'Contracts for 2000 and 2001.' For the payment of community reinvestment
8	funds that are earned as part of contracts entered into under s. 49.143 having a term
(9)	that begins on January 1, 2000, and ends on December 2001, \$2,769,900 in fiscal
10	year 2001–02 and \$5,539,700 in fiscal year 2002–03.
11	*b2096/2.1* Section 1682cd. 49.175 (1) (d) 1. of the statutes, as affected by
12	2001 Wisconsin Act (this act), is repealed.
13	*b2096/2.1* Section 1682ce. 49.175 (1) (d) 2. (title) of the statutes, as affected
14	by 2001 Wisconsin Act (this act), is repealed.
15	*b2096/2.1* Section 1682cf. 49.175 (1) (d) 2. of the statutes, as affected by
16	2001 Wisconsin Act (this act), is renumbered 49.175 (1) (d).".
17	*b1994/8.38* 946. Page 602, line 12: delete "December 1" and substitute
18	December 31".
	***NOTE: Corrects a date.
19	*b2023/3.4* 947. Page 603, line 6: delete "\$24,767,500" and substitute
20	"\$24,680,700".
21	*b2023/3.5* 948. Page 603, line 7: delete "\$24,780,000" and substitute
22	"\$24,693,200".
23	*b2019/3.2* 949. Page 603, line 19: delete lines 19 to 21.

1	*b2038/1.2* 950. Page 604, line 14: delete "\$11,145,900" and substitute
2	"\$11,395,900".
3	*b2038/1.3* 951. Page 604, line 14: delete "\$2,500,000" and substitute
4	" $$2,750,000$ ".
5	*b2018/2.8* 952. Page 604, line 19: after "attachment" insert "and
6	advancement program".
7	*b2018/2.9* 953. Page 604, line 21: delete "\$5,000,000" and substitute
8	"\$7,842,200".
9	*b2020/2.2* 954. Page 605, line 1: delete the material beginning with
10	"under" and ending with "49.157," on line 2 and substitute "under s. 49.157,".
11	*b2020/2.3* 955. Page 605, line 2: delete "\$1,000,000" and substitute "for
12	individuals who are eligible to receive temporary assistance for needy families under
13	42 USC 601 et. seq. \$900,000".
14	*b2127/3.4* 956. Page 607, line 6: delete " <u>\$83,200 in each</u> " and substitute
15	"\$93,400 in".
16	* b2127 /3.5* 957. Page 607, line 7: after "2000-01" insert "2002-03".
17	*b0747/1.4* 958. Page 607, line 14: after that line insert:
18	*b0747/1.4* "Section 1714d. 49.175 (1) (zo) of the statutes is created to read:
19	49.175 (1) (20) After-school care program. For the transfer of moneys to the
20	department of public instruction for the after-school care grant program under 2001
21	Wisconsin Act (this act), section 9140 (6w), \$150,000 in fiscal year 2002–03.".
22	*b2023/3.6* 959. Page 609, line 13: delete "(br),".

1	*b1994/8.39* 960. Page 611, line 5: delete the material beginning with ", aid"
2	and ending with "49.19" on line 6 and substitute ", aid to families with dependent
3	children under s. 49.19".
•	****NOTE: Corrects a reconciliation error.
4	*b1994/8.40* 961. Page 611, line 6: delete "2029" and substitute "2029 2036".
	****Note: Corrects a reconciliation error.
5	*b1994/8.41* 962. Page 611, line 10: delete "The" and substitute "The If the
6	department of health and family services contracts with the department under sub.
7	(5), the".
	****Note: Corrects a reconciliation error.
8	
9	*b2091/2.4* 963. Page 611, line 11: delete "appropriations" and substitute "appropriations appropriation".
10	
	b2091/2.5 964. Page 611, line 11: delete the material beginning with "(dz)"
11	and ending with "(nL)" on line 12 and substitute "(dz) and (L) and federal matching
12	funds from the appropriations under s. 20.445 (3) (n) and (nL) (kx)".
13	*b1994/8.42* 965. Page 611, line 14: delete the material beginning with
14	"medical" and ending with "2036" on line 18 and substitute "medical assistance
15	under subch. IV or the food stamp program under 7 USC 2011 to 2036".
	****Note: Corrects a reconciliation error.
16	*b1994/8.43* 966. Page 615, line 19: after "46.23" insert ", and may contract
17	with tribal governing bodies,".
	****Note: Corrects a reconciliation error.
18)	*b1994/8.44* 967. Page 615 line 20 0 0
19	governing bodies".
20	*b1402/1.5* 968. Page 621, line 12: after that line insert:

b1402/1.5 "Section 1750w. 49.45 (2) (a) 24. of the statutes is created to read:
49.45 (2) (a) 24. Promulgate rules that require that the written plan of care for
persons receiving personal care services under medical assistance be reviewed by a
registered nurse at least every 60 days. The rules shall provide that the written plan
of care shall designate intervals for visits to the recipient's home by a registered
nurse as part of the review of the plan of care. The designated intervals for visits
shall be based on the individual recipient's needs, and each recipient shall be visited
in his or her home by a registered nurse at least once in every 12-month period. The
rules shall also provide that a visit to the recipient is also required if, in the course
of the nurse's review of the plan of care, there is evidence that a change in the
recipient's condition has occurred that measures at
recipient's condition has occurred that may warrant a change in the plan of care.".
b2027/1.4 969. Page 621, line 12: after that line insert:
* b2027/1.4* "Section 1750d. 49.45 (2) (a) 10. of the statutes is renumbered
49.45 (2) (a) 10. a. and amended to read:
49.45 (2) (a) 10. a. After reasonable notice and opportunity for hearing, recover
money improperly or erroneously paid, or overpayments to a provider either by
offsetting or adjusting amounts owed the provider under the program, crediting
against a provider's future claims for reimbursement for other services or items
furnished by the provider under the program, or by requiring the provider to make
direct payment to the department or its fiscal intermediary.
b2027/1.4 SECTION 1750f. 49.45 (2) (a) 10. b. of the statutes is created to read:
49.45 (2) (a) 10. b. Establish a deadline for payment of a recovery imposed
under this subdivision and, if a provider fails to pay all of the amount to be recovered

by the deadline, require payment, by the provider, of interest on any delinquent

	ı.	amount at the rate of 1% per month or fraction of a month from the date of the
	2	overpayment.
,	3	*b2027/1.4* SECTION 1750g. 49.45 (2) (a) 10. c. of the statutes is created to
	4	read:
	5	49.45 (2) (a) 10. c. Promulgate rules to implement this subdivision.
	6	*b2027/1.4* Section 1750h. 49.45 (2) (a) 11. of the statutes is renumbered
	7	49.45 (2) (a) 11. a. and amended to read:
	8	49.45 (2) (a) 11. a. Establish criteria for the certification of eligible providers
	9	of services under Title XIX of the social security act medical assistance and, except
	10	as provided in par. (b) 6m. and s. 49.48, and subject to par. (b) 7. and 8., certify such
	11	eligible providers who meet the criteria.
	12	*b2027/1.4* SECTION 1750i. 49.45 (2) (a) 11. b. of the statutes is created to read:
	13	49.45 (2) (a) 11. b. Promulgate rules to implement this subdivision.
	14	*b2027/1.4* Section 1750j. 49.45 (2) (a) 12. of the statutes is renumbered
. •	15	49.45 (2) (a) 12. a. and amended to read:
1	16	49.45 (2) (a) 12. a. Decertify or suspend under this subdivision a provider from
1	L 7	or restrict a provider's participation in the medical assistance program, if after
1	.8	giving reasonable notice and opportunity for hearing, the department finds that the
1	.9	provider has violated <u>a</u> federal <u>statute or regulation</u> or <u>a</u> state <u>law statute</u> or
2	0	administrative rule and such violations are by law the violation is by statute,
2	1	regulation, or rule grounds for decertification on guarantees
2	2	department shall suspend the provider pending the hearing under this subdivision
2	3	if the department includes in its decertification notice findings that the provider's
2	4	continued participation in the medical assistance program pending hearing is likely
25	5	to lead to the irretrievable loss of public funds and is unnecessary to provide

adequate access to services to medical assistance recipients. As soon as practicable after the hearing, the department shall issue a written decision. No payment may be made under the medical assistance program with respect to any service or item furnished by the provider subsequent to decertification or during the period of suspension.

b2027/1.4 **Section 1750k.** 49.45 (2) (a) 12. b. of the statutes is created to read:

49.45 (2) (a) 12. b. Promulgate rules to implement this subdivision.

b2027/1.4 Section 1750L. 49.45 (2) (b) 6m. of the statutes is created to read: 49.45 (2) (b) 6m. Limit the number of providers of particular services that may be certified under par. (a) 11. or the amount of resources, including employees and equipment, that a certified provider may use to provide particular services to medical assistance recipients, if the department finds that existing certified providers and resources provide services that are adequate in quality and amount to meet the need of medical assistance recipients for the particular services; and if the department finds that the potential for medical assistance fraud or abuse exists if additional providers are certified or additional resources are used by certified providers. The department shall promulgate rules to implement this subdivision.

b2027/1.4 Section 1750n. 49.45 (2) (b) 7 of the statutes is created to read: 49.45 (2) (b) 7. Require, as a condition of certification under par. (a) 11., all providers of a specific service that is among those enumerated under s. 49.46 (2) or 49.47 (6) (a), as specified in this subdivision, to file with the department a surety bond issued by a surety company licensed to do business in this state. Providers subject to this subdivision provide those services specified under s. 49.46 (2) or 49.47 (6) (a) for which providers have demonstrated significant potential to violate s. 49.49 (1) (a),

(2) (a) or (b), (3), (3m) (a), (3p), (4) (a), or (4m) (a), to require recovery under par. (a)
10., or to need additional sanctions under par. (a) 13. The surety bond shall be
payable to the department in an amount that the department determines is
reasonable in view of amounts of former recoveries against providers of the specific
service and the department's costs to pursue those recoveries. The department shall
promulgate rules to implement this subdivision that specify all of the following:

- a. Services under medical assistance for which providers have demonstrated significant potential to violate s. 49.49 (1) (a), (2) (a) or (b), (3), (3m) (a), (3p), (4) (a), or (4m) (a), to require recovery under par. (a) 10., or to need additional sanctions under par. (a) 13.
 - b. The amount or amounts of the surety bonds.
- c. Terms of the surety bond, including amounts, if any, without interest to be refunded to the provider upon withdrawal or decertification from the medical assistance program.

b2027/1.4 SECTION 1750p. 49.45 (2) (b) 8. of the statutes is created to read: 49.45 (2) (b) 8. Require a person who takes over the operation, as defined in sub. (21) (ag), of a provider, to first obtain certification under par. (a) 11. for the operation of the provider, regardless of whether the person is currently certified. The department may withhold the certification required under this subdivision until any outstanding repayment under sub. (21) is made. The department shall promulgate rules to implement this subdivision.

b2027/1.4 Section 1750r. 49.45 (2) (b) 9. of the statutes is created to read: 49.45 (2) (b) 9. After providing reasonable notice and opportunity for a hearing, charge an assessment to a provider that repeatedly has been subject to recoveries under par. (a) 10. a. because of the provider's failure to follow identical or similar

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

billing procedures or to follow other identical or similar program requirements. The assessment shall be used to defray in part the costs of audits and investigations by the department under sub. (3) (g) and may not exceed \$1,000 or 200% of the amount of any such repeated recovery made, whichever is greater. The provider shall pay the assessment to the department within 10 days after receipt of notice of the assessment or the final decision after administrative hearing, whichever is later. The department may recover any part of an assessment not timely paid by offsetting the assessment against any medical assistance payment owed to the provider and may refer any such unpaid assessments not collected in this manner to the attorney general, who may proceed with collection under this subdivision. Failure to timely pay in any manner an assessment charged under this subdivision, other than an assessment that is offset against any medical assistance payment owed to the provider, is grounds for decertification under subd. 12. A provider's payment of an assessment does not relieve the provider of any other legal liability incurred in connection with the recovery for which the assessment is charged, but is not evidence of violation of a statute or rule. The department shall credit all assessments received under this subdivision to the appropriation account under s. 20.435 (4) (iL). The department shall promulgate rules to implement this subdivision.

b2027/1.4 **SECTION 1750t.** 49.45 (3) (g) of the statutes is renumbered 49.45 (3) (g) 1. and amended to read:

49.45 (3) (g) 1. The secretary may appoint authorize personnel to audit or investigate and report to the department on any matter involving violations or complaints alleging violations of laws statutes, regulations, or rules applicable to Title XIX of the federal social security act or the medical assistance program and to perform such investigations or audits as are required to verify the actual provision

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

of services or items available under the medical assistance program and the appropriateness and accuracy of claims for reimbursement submitted by providers participating in the program. Department employees appointed authorized by the secretary under this paragraph shall be issued, and shall possess at all times during which while they are performing their investigatory or audit functions under this section, identification, signed by the secretary which, that specifically designates the bearer as possessing the authorization to conduct medical assistance investigations Pursuant to Under the request of a designated person and upon presentation of that the person's authorization, providers and medical assistance recipients shall accord such the person access to any provider personnel, records. books, recipient medical records, or documents or other information needed. Under the written request of a designated person and upon presentation of the person's authorization, providers and recipients shall accord the person access to any needed patient health care records of a recipient. Authorized employees shall have authority to may hold hearings, administer oaths, take testimony, and perform all other duties necessary to bring such the matter before the department for final adjudication and determination.

b2027/1.4 Section 1750td. 49.45 (3) (g) 2. of the statutes is created to read: 49.45 (3) (g) 2. The department shall promulgate rules to implement this paragraph.

b2027/1.4 Section 1750v. 49.45 (3) (h) 1. of the statutes is repealed.

b2027/1.4 Section 1750x. 49.45 (3) (h) 2. of the statutes is repealed.

b2027/1.4 Section 1750z. 49.45 (3) (h) 3. of the statutes is renumbered 49.45

(3) (h) 1m. and amended to read:

Lyent 318-21

12

13

14

15

16

17

18

19

20

21

22

23

24

49.45 (3) (h) 1m. The failure or refusal of a person to purge himself or herself of contempt found under s. 885.12 and perform the act as required by law shall 2 constitute provider to accord department auditors or investigators access as required 3 under par. (g) to any provider personnel, records, books, patient health care records 4 5 of medical assistance recipients, or documents or other information requested constitutes grounds for decertification or suspension of that person the provider from 6 participation in the medical assistance program and no. No payment may be made 7 for services rendered by that person subsequent to the provider following 8 decertification er, during the period of suspension, or during any period of provider 9 failure or refusal to accord access as required under par. (g). 10 *b2027/1.4* Section 1750.4. 49.45 (3) (h) 1n. of the statutes is created to read: 11 49.45 (3) (h) 1n. The department shall promulgate rules to implement this paragraph!". *b2144/1.6* 970. Page 622, line 8: delete ", or (w)" and substitute ". (w), or (wm)". *b1413/3.1* 971. Page 622, line 14: delete lines 14 to 21. ***b2144/1.7*** **972.** Page 624, line 21: delete "<u>and (w)</u>" and substitute "<u>, (w), and</u> (wm)". *b2052/2.1* 973. Page 627, line 2: after that line insert: *b2052/2.1* "Section 1778d. 49.45 (6v) (b) of the statutes is amended to read: 49.45 (6v) (b) The Beginning on October 1, 2003, and annually thereafter, the department shall, each year, submit to the joint committee on finance a report for the previous fiscal year, except for the 1997-98 fiscal year, that provides information on

the utilization of beds by recipients of medical assistance in facilities and a

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

discussion and detailed projection of the likely balances, expenditures, encumbrances and carry over of currently appropriated amounts in the appropriation accounts under s. 20.435 (4) (b) and (c) for the immediately prior 2 consecutive fiscal years.

b2052/2.1 **Section 1778h.** 49.45 (6v) (c) of the statutes is amended to read: 49.45 (6v) (c) If the report specified in par. (b) indicates that utilization of beds by recipients of medical assistance in facilities is less than estimates for that utilization reflected in the intentions of the joint committee on finance, legislature and governor, as expressed by them in the budget determinations, the department shall include a proposal to transfer moneys from the appropriation under s. 20.435 (4) (b) to the appropriation under s. 20.435 (7) (bd) for the purpose of increasing funding for the community options program under s. 46.27. The amount proposed for transfer may not reduce the balance in the appropriation account under s. 20.435 (4) (b) below an amount necessary to ensure that that appropriation account will end the current fiscal year or the current fiscal biennium with a positive balance. The secretary shall transfer the amount identified under the proposal decreased during the most recently completed fiscal year from the utilization of beds by recipients of medical assistance in facilities in the next most recently completed fiscal year, the department shall multiply the difference between the number of days of care provided to the recipients in the facilities in each of those prior 2 consecutive fiscal years by the average daily costs of care in the facilities for the most recently completed fiscal year. The average daily costs of care shall be calculated by dividing the total of medical assistance expenditures for care in facilities for the most recently completed fiscal year by the total number of days of care provided in facilities in that fiscal year.

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22.

23

24

b2052/2.1 Section 1778p. 49.45 (6v) (d) of the statutes is created to read: 49.45 (6v) (d) If par. (c) applies and if the amount calculated under par. (c) is positive, the department's report under par. (b) shall include a proposal to transfer an amount equal to the portion of the amount calculated under par. (c) that is the state share of medical assistance expenditures from the appropriation account under s. 20.435 (4) (b) to the appropriation account under s. 20.435 (7) (bd) for the purpose of increasing funding for the long-term support community options program under s. 46.27. If the cochairpersons of the joint committee on finance do not notify the secretary within 14 working days after the date on which the department submits the proposal that the committee has scheduled a meeting for the purpose of reviewing the proposal, the secretary shall transfer the amount identified under the proposal. If, within 14 working days after the date on which the department submits the proposal, the cochairpersons of the joint committee on finance notify the secretary that the committee has scheduled a meeting for the purpose of reviewing the proposal, the secretary may transfer moneys from the appropriation account under s. 20.435 (4) (b) to the appropriation account under s. 20.435 (7) (bd) only as approved by the committee. *b2052/2.1* Section 1778r. 49.45 (6v) (e) of the statutes is created to read: 49.45 (6v) (e) Of the amount required to be transferred by the secretary under par. (d), 40% shall be expended for services as specified under s. 46.27 (7) and 60%

b2027/1.5 974. Page 628, line 21: after that line insert:

shall be expended for services as specified under s. 46.27 (11).".

b2027/1.5 "**SECTION 1786g.** 49.45 (21) (title) of the statutes is amended to read:

1	49.45 (21) (title) Transfer of business, liability for Taking over provider's
2	OPERATION; REPAYMENTS REQUIRED.
3	* b2027/1.5 * SECTION 1786h. 49.45 (21) (a) of the statutes is renumbered 49.45
1	(21) (ar) and amended to read:
5	49.45 (21) (ar) If any provider Before a person may take over the operation of
6	a provider that is liable for repayment of improper or erroneous payments or
7	overpayments under ss. 49.43 to 49.497 sells or otherwise transfers ownership of his
8	or her business or all or substantially all of the assets of the business, the transferor
9	and transferce are each liable for the repayment. Prior to final transfer, the
10	transferee is responsible for contacting the department and ascertaining if the
11	transferor, full repayment shall be made. Upon request, the department shall notify
12	the provider or the person that intends to take over the operation of the provider as
13	to whether the provider is liable under this paragraph.
14	* b2027/1.5 * S ECTION 1786i. 49.45 (21) (ag) of the statutes is created to read:
15	49.45 (21) (ag) In this subsection, "take over the operation" means obtain, with
16	respect to an aspect of a provider's business for which the provider has filed claims
17	for medical assistance reimbursement, any of the following:
18	1. Ownership of the provider's business or all or substantially all of the assets
19	of the business.
20	2. Majority control over decisions.
21	3. The right to any profits or income.
22	4. The right to contact and offer services to patients, clients, or residents served
23	by the provider.

1	5. An agreement that the provider will not compete with the person at all or
2	with respect to a patient, client, resident, service, geographical area, or other part
3	of the provider's business.
4	6. The right to perform services that are substantially similar to services
5	performed by the provider at the same location as those performed by the provider.
6	7. The right to use any distinctive name or symbol by which the provider is
7	known in connection with services to be provided by the person.
8	*b2027/1.5* Section 1786j. 49.45 (21) (b) of the statutes is amended to read:
9	49.45 (21) (b) If a transfer occurs If, notwithstanding the prohibition under par.
10	(ar), a person takes over the operation of a provider and the applicable amount under
11	par. (a) (ar) has not been repaid, the department may in addition to withholding
12	certification as authorized under sub. (2) (b) 8., proceed against either the transferor
13	or the transferee the provider or the person. Within 30 days after receiving the
14	certified provider receives notice from the department, the transferor or the
15	transferee shall pay the amount shall be repaid in full. Upon failure to comply If the
16	amount is not repaid in full, the department may bring an action to compel payment.
17	If a transferor fails to pay within 90 days after receiving notice from the department,
18	the department, may proceed under sub. (2) (a) 12., or may do both.
19	*b2027/1.5* Section 1786k. 49.45 (21) (e) of the statutes is created to read:
20	49.45 (21) (e) The department shall promulgate rules to implement this
21	subsection.".
22	*b2193/1.19* 975. Page 630, line 7: after that line insert:
23	*b2193/1.19* "Section 1789b. 49.45 (39) (a) 1. of the statutes is amended to
24	read:

· 9

49.45 (39) (a) 1. "School" means a public school described under s. 115.01 (1), a charter school, as defined in s. 115.001 (1), the Wisconsin Center for the Blind and Visually Impaired, or the Wisconsin School Educational Services Program for the Deaf and Hard of Hearing. It includes school—operated early childhood programs for developmentally delayed and disabled 4—year—old and 5—year—old children.

b2193/1.19 SECTION 1789c. 49.45 (39) (am) of the statutes is amended to read:

49.45 (39) (am) Plan amendment. No later than September 30, 1995, the department shall submit to the federal department of health and human services an amendment to the state medical assistance plan to permit the application of pars. (b) and (c). If the amendment to the state plan is approved, school districts, cooperative educational service agencies, and the department of public instruction on behalf of the Wisconsin Center for the Blind and Visually Impaired and the Wisconsin School Educational Services Program for the Deaf and Hard of Hearing claim reimbursement under pars. (b) and (c). Paragraphs (b) and (c) do not apply unless the amendment to the state plan is approved and in effect. The department shall submit to the federal department of health and human services an amendment to the state plan if necessary to permit the application of pars. (b) and (c) to the Wisconsin Center for the Blind and Visually Impaired and the Wisconsin School Educational Services Program for the Deaf and Hard of Hearing.

b2193/1.19 Section 1789d. 49.45 (39) (b) of the statutes is amended to read:

49.45 (39) (b) School medical services. 1. 'Payment for school medical services.' If a school district or a cooperative educational service agency elects to provide school medical services and meets all requirements under par. (c), the department shall reimburse the school district or the cooperative educational service agency for 60%

20

21

22

23

24

25

of the federal share of allowable charges for the school medical services that it 1 provides and, as specified in subd. 2., for allowable administrative costs. If the 2 Wisconsin Center for the Blind and Visually Impaired or the Wisconsin School 3 Educational Services Program for the Deaf and Hard of Hearing elects to provide 4 school medical services and meets all requirements under par. (c), the department 5 shall reimburse the department of public instruction for 60% of the federal share of 6 allowable charges for the school medical services that the Wisconsin Center for the 7 Blind and Visually Impaired or the Wisconsin School Educational Services Program 8 for the Deaf and Hard of Hearing provides and, as specified in subd. 2., for allowable 9 administrative costs. A school district, cooperative educational service agency, the 10 Wisconsin Center for the Blind and Visually Impaired or the Wisconsin School 11 Educational Services Program for the Deaf and Hard of Hearing may submit, and 12 the department shall allow, claims for common carrier transportation costs as a 13 school medical service unless the department receives notice from the federal health 14 15 care financing administration that, under a change in federal policy, the claims are not allowed. If the department receives the notice, a school district, cooperative 16 17 educational service agency, the Wisconsin Center for the Blind and Visually Impaired, or the Wisconsin School Educational Services Program for the Deaf and 18 Hard of Hearing may submit, and the department shall allow, unreimbursed claims for common carrier transportation costs incurred before the date of the change in federal policy. The department shall promulgate rules establishing a methodology for making reimbursements under this paragraph. All other expenses for the school medical services provided by a school district or a cooperative educational service agency shall be paid for by the school district or the cooperative educational service agency with funds received from state or local taxes. The school district, the

Wisconsin Center for the Blind and Visually Impaired, the Wisconsin School Educational Services Program for the Deaf and Hard of Hearing, or the cooperative educational service agency shall comply with all requirements of the federal department of health and human services for receiving federal financial participation.

2. Payment for school medical services administrative costs.' The department shall reimburse a school district or a cooperative educational service agency specified under subd. 1. and shall reimburse the department of public instruction on behalf of the Wisconsin Center for the Blind and Visually Impaired or the Wisconsin School Educational Services Program for the Deaf and Hard of Hearing for 90% of the federal share of allowable administrative costs, using time studies, beginning in fiscal year 1999–2000. A school district or a cooperative education educational service agency may submit, and the department of health and family services shall allow, claims for administrative costs incurred during the period that is up to 24 months before the date of the claim, if allowable under federal law.".

b1046/1.3 976. Page 630, line 14: after that line insert:

b1046/1.3 "Section 1791h. 49.45 (47) (c) of the statutes is amended to read:

49.45 (47) (c) The biennial fee for the certification required under par. (b) of an adult day care center is \$89, plus a biennial fee of \$17.80 per client, based on the number of clients that the adult day care center is certified to serve \$100. Fees collected under this paragraph shall be credited to the appropriation account under s. 20.435 (6) (jm).

b1046/1.3 Section 1791i. 49.45 (47) (d) of the statutes is repealed.".

b2042/2.1 977. Page 632, line 4: after that line insert:

1	* b2042/2.1 * " Section 1799f. 49.46 (1) (a) 5m. of the statutes is created to read:
2	49.46 (1) (a) 5m. Any individual who is at least 19 years of age but under 20
3	years of age and who, on his or her 18th birthday, was in foster care, or treatment
4	foster care placement under ch. 48 or 938, as determined by the department.".
5	*b2202/2.7* 978. Page 646, line 22: after that line insert:
6	*b2202/2.7* "Section 1838gb. 49.688 of the statutes is created to read:
7	49.688 Prescription drug assistance for elderly persons. (1) In this
8	section:
9	(a) "Generic name" has the meaning given in s. 450.12 (1) (b).
10	(b) "Poverty line" means the nonfarm federal poverty line for the continental
11	United States, as defined by the federal department of labor under 42 USC 9902 (2).
12	(c) "Prescription drug" means a prescription drug, as defined in s. 450.01 (20),
13	that is included in the drugs specified under s. 49.46 (2) (b) 6. h. and that is
14	manufactured by a drug manufacturer that enters into a rebate agreement in force
15	under sub. (6).
16	(d) "Prescription order" has the meaning given in s. 450.01 (21).
17	(e) "Program payment rate" means the rate of payment made for the identical
18	drug specified under s. 49.46 (2) (b) 6. h., plus 5%, plus a dispensing fee that is equal
19	to the dispensing fee permitted to be charged for prescription drugs for which
20	coverage is provided under s. 49.46 (2) (b) 6. h.
21	(2) (a) A person to whom all of the following applies is eligible to purchase a
22	prescription drug for the amounts specified in sub. (5) (a) 1. and 2.:
23	1. The person is a resident, as defined in s. 27.01 (10) (a), of this state.
24	2. The person is at least 65 years of age.

- The person is not a recipient of medical assistance.
 - 4. The person's annual household income, as determined by the department, does not exceed 240% of the federal poverty line for a family the size of the person's eligible family.
 - 5. The person pays the program enrollment fee specified in sub. (3) (a).
 - (b) A person to whom par. (a) 1. to 3. and 5. applies, but whose annual household income, as determined by the department, exceeds 240% of the federal poverty line for a family the size of the persons' eligible family, is eligible to purchase a prescription drug at the amounts specified in sub. (5) (a) 4. only during the remaining amount of any 12-month period in which the person has first paid the annual deductible specified in sub. (3) (b) 2. a. in purchasing prescription drugs at the retail price and has then paid the annual deductible specified in sub. (3) (b) 2. b.
 - (3) Program participants shall pay all of the following:
 - (a) For each 12-month benefit period, a program enrollment fee of \$20.
 - (b) 1. For each 12-month benefit period, for a person specified in sub. (2) (a), a deductible for prescription drugs of \$500, except that a person whose annual household income, as determined by the department, is 160% or less of the federal poverty line for a family the size of the person's eligible family pays no deductible.
 - 2. For each 12-month benefit period, for a person specified in sub. (2) (b), a deductible for prescription drugs that equals all of the following:
 - a. The difference between the person's annual household income and 240% of the federal poverty line for a family the size of the person's eligible family.
 - b. Five hundred dollars.
 - (c) After payment of any applicable deductible under par. (b), all of the following:

18

19

20

21

22

23

24

- 1 1. A copayment of \$5 for each prescription drug that bears only a generic name. 2. A copayment of \$15 for each prescription drug that does not bear only a 2 3 generic name. 4 (d) Notwithstanding s. 49.002, if a person who is eligible under this section has other available coverage for payment of a prescription drug, this section applies only 5 to costs for prescription drugs for the persons that are not covered under the person's 6 7 other available coverage. 8 (4) The department shall devise and distribute a form for application for the program under sub. (2), shall determine eligibility for each 12-month benefit period 9 of applicants and shall issue to eligible persons a prescription drug card for use in 10 purchasing prescription drugs, as specified in sub. (5). The department shall 11 promulgate rules that specify the criteria to be used to determine household income 12 13 under sub. (2) (a) 4. and (b) and (3) (b) 1. 14 (5) (a) Beginning on September 1, 2002, except as provided in sub. (7) (b), as a condition of participation by a pharmacy or pharmacist in the program under s. 15 49.45, 49.46, or 49.47, the pharmacy or pharmacist may not charge a person who 16
 - (5) (a) Beginning on September 1, 2002, except as provided in sub. (7) (b), as a condition of participation by a pharmacy or pharmacist in the program under s. 49.45, 49.46, or 49.47, the pharmacy or pharmacist may not charge a person who presents a valid prescription order and a card indicating that he or she meets eligibility requirements under sub. (2) an amount for a prescription drug under the order that exceeds the following:
 - 1. For a deductible, as specified in sub. (3) (b) 1. and 2. b., the program payment rate.
 - 2. After any applicable deductible under subd. 1. is charged, the copayment, as applicable, that is specified in sub. (3) (c) 1. or 2. No dispensing fee may be charged to a person under this subdivision.
 - 3. For a deductible, as specified in sub. (3) (b) 2. a., the retail price.

- 4. After the deductible under subd. 3. is charged, the copayment, as applicable, that is specified in sub. (3) (c) 1. or 2. No dispensing fee may be charged to a person under this subdivision.
- (b) The department shall calculate and transmit to pharmacies and pharmacists that are certified providers of medical assistance amounts that may be used in calculating charges under par. (a). The department shall periodically update this information and transmit the updated amounts to pharmacies and pharmacists.
- (6) The department, or an entity with which the department contracts, shall provide to a drug manufacturer that sells drugs for prescribed use in this state documents designed for use by the manufacturer in entering into a rebate agreement with the department or entity that is modeled on the rebate agreement specified under 42 USC 1396r–8. A rebate agreement under this subsection shall include all of the following as requirements:
- (a) That, except as provided in sub. (7) (b), the manufacturer shall make rebate payments for each prescription drug of the manufacturer that is prescribed for and purchased by persons who meet criteria under sub. (2) (a) and persons who meet criteria under sub. (2) (b) and have paid the deductible under sub. (3) (b) 2. a., to the state treasurer to be credited to the appropriation account under s. 20.435 (4) (j), each calendar quarter or according to a schedule established by the department.
- (b) That, except as provided in sub. (7) (b), the amount of the rebate payment shall be determined by a method specified in 42 USC 1396r-8 (c).
- (7) (a) Except as provided in par. (b), from the appropriation accounts under s. 20.435 (4) (bv) and (j), beginning on September 1, 2002, the department shall, under a schedule that is identical to that used by the department for payment of pharmacy provider claims under medical assistance, provide to pharmacies and

- pharmacists payments for prescription drugs sold by the pharmacies or pharmacists to persons eligible under sub. (2) who have paid the deductible specified under sub. (3) (b) 1. or 2. or who, under sub. (3) (b) 1., are not required to pay a deductible. The payment for each prescription drug under this paragraph shall be at the program payment rate, minus any copayment paid by the person under sub. (5) (a) 2. or 4., and plus, if applicable, incentive payments that are similar to those provided under s. 49.45 (8v). The department shall devise and distribute a claim form for use by pharmacies and pharmacists under this paragraph and may limit payment under this paragraph to those prescription drugs for which payment claims are submitted by pharmacists or pharmacies directly to the department. The department may apply to the program under this section the same utilization and cost control procedures that apply under rules promulgated by the department to medical assistance under subch. IV of ch. 49.
- (b) During any period in which funding under s. 20.435 (4) (bv) is completely expended for the payments specified in par. (a), the requirements of par. (a) and subs. (3) (c), (5), and (6) (a) and (b) do not apply to drugs purchased during that period, but the department shall continue to accept applications and determine eligibility under sub. (4) and shall indicate to applicants that the eligibility of program participants to purchase prescription drugs as specified in sub. (3), under the requirements of sub. (5), is conditioned on the availability of funding under s. 20.435 (4) (bv).
- (8) The department shall, under methods promulgated by the department by rule, monitor compliance by pharmacies and pharmacists that are certified providers of medical assistance with the requirements of sub. (5) and shall annually report to the legislature under s. 13.172 (2) concerning the compliance. The report shall include information on any pharmacies or pharmacists that discontinue

 $\mathbf{2}$

- participation as certified providers of medical assistance and the reasons given for the discontinuance.
- (9) (a) The department shall promulgate rules relating to prohibitions on fraud that are substantially similar to applicable provisions under s. 49.49 (1) (a).
- (b) A person who is convicted of violating a rule promulgated by the department under par. (a) in connection with that person's furnishing of prescription drugs under this section may be fined not more than \$25,000, or imprisoned for not more than 7 years and 6 months, or both.
- (c) A person other than a person specified in par. (b) who is convicted of violating a rule promulgated by the department under par. (a) may be fined not more than \$10,000, or imprisoned for not more than one year, or both.
- (10) If federal law is amended to provide coverage for prescription drugs for outpatient care as a benefit under medicare or to provide similar coverage under another program, the department shall submit to appropriate standing committees of the legislature under s. 13.172 (3) a report that contains an analysis of the differences between such a federal program and the program under this section and that provides recommendations concerning alignment, if any, of the differences.
- (11) The department shall request from the federal secretary of health and human services a waiver, under 42 USC 1315 (a), of federal medicaid laws necessary to permit the department of health and family services to conduct a project, under all of the requirements of this section, to expand eligibility for medical assistance, for purposes of receipt of prescription drugs as a benefit, to include individuals who are eligible under sub. (2). The department may implement a waiver requested under this subsection only if the conditions of the waiver are consistent with the requirements of this section. The department shall implement the program under

this section regardless of whether a waiver, as specified in this subsection, is received.

(12) Except as provided in subs. (8) to (11) and except for the department's rule—making requirements and authority, the department may enter into a contract with an entity to perform the duties and exercise the powers of the department under this section.".

b2027/1.6 979. Page 648, line 12: after that line insert:

b2027/1.6 "Section 1838w. 49.85 (2) (a) of the statutes is amended to read: 49.85 (2) (a) At least annually, the department of health and family services shall certify to the department of revenue the amounts that, based on the notifications received under sub. (1) and on other information received by the department of health and family services, the department of health and family services has determined that it may recover under s. 49.45 (2) (a) 10. or 49.497, except that the department of health and family services may not certify an amount under this subsection unless it has met the notice requirements under sub. (3) and unless its determination has either not been appealed or is no longer under appeal.".

b2027/1.7 980. Page 648, line 21: after that line insert:

b2027/1.7 "Section 1840e. 49.85 (3) (a) 1. of the statutes is amended to read: 49.85 (3) (a) 1. Inform the person that the department of health and family services intends to certify to the department of revenue an amount that the department of health and family services has determined to be due under s. 49.45 (2) (a) 10. or 49.497, for setoff from any state tax refund that may be due the person.".

b1417/2.1 981. Page 653, line 10: after that line insert:

b1417/2.1 "Section 1877g. 50.01 (1) (b) of the statutes is amended to read:

50.01 (1) (b) A place where 3 or 4 adults who are not related to the operat
reside and receive care, treatment or services that are above the level of room ar
board and that may include up to 7 hours per week of nursing care per resider
"Adult family home" does not include a place that is specified in sub. (1g) (a) to (0
(f) or (g) or a respite facility, as defined in s. 50.85 (1) (d).

b1417/2.1 SECTION 1877h. 50.01 (1g) (h) of the statutes is created to read:

50.01 (1g) (h) A respite facility, as defined in s. 50.85 (1) (d).

b1417/2.1 Section 1877i. 50.01 (3) (f) of the statutes is created to read:

50.01 (3) (f) A respite facility, as defined in s. 50.85 (1) (d).".

b2027/1.8 982. Page 653, line 10: after that line insert:

b2027/1.8 "Section 1877p. 50.03 (13) (a) of the statutes is amended to read:

50.03 (13) (a) New license. Whenever ownership of a facility is transferred from the person or persons named in the license to any other person or persons, the transferee must obtain a new license. The license may be a probationary license. Penalties under sub. (1) shall apply to violations of this subsection. The transferee shall notify the department of the transfer, file an application under sub. (3) (b), and apply for a new license at least 30 days prior to final transfer. Retention of any interest required to be disclosed under sub. (3) (b) after transfer by any person who held such an interest prior to transfer may constitute grounds for denial of a license where violations of this subchapter for which notice had been given to the transferor are outstanding and uncorrected, if the department determines that effective control over operation of the facility has not been transferred. If the transferor was a provider under s. 49.43 (10), the transferee and transferor shall comply with s. 49.45 (21).".